

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL050016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/07/2016
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NAME OF PROVIDER OR SUPPLIER MORNINGSTAR ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 95 MORNINGSTAR LANE SYLVA, NC 28779
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Dennis Harrell on 7-7-2016.</p> <p>Records indicate this facility was first licensed on 12-1-1973, for 55 residents. Based on this information we are requiring the facility to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1967 North Carolina State Building Code Section 407.1, Group D-2 Institutional Occupancy.</p>	C 000		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: Based on a review of documents, the most recent Fire Marshal building safety inspection report was dated in 6-24-2014. The most recent fire alarm inspection was dated 7-1-2015. Buildings and fire alarm systems must be inspected and approved annually as required to ensure all systems can operate properly an actual emergency.</p>	C 111		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p>	C 166		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 166	<p>Continued From page 1</p> <p>(a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the exterior exit path from the exit near room 108 was partially obstructed with a chair and bed rails. Obstructed exit paths could delay or prevent an evacuation in an emergency.</p> <p>2. Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: Several portable medical oxygen cylinders were stored in an unapproved beverage crate.</p> <p>3. Based on observation, there was no key onsite when the survey first began to allow access into the Director's office. The room could not be surveyed for hazards until some time later when the Director arrived. Keys should be maintained onsite at all times for all spaces.</p>	C 166		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code</p>	C 185		

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C 185	Continued From page 2 Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on a review of documents, the only records available onsite included no description of what the rehearsal involved.	C 185		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, all the smoke barrier doors in the facility were wedged open when the survey began. The staff stated that the doors had all closed during the night when the power blinked off for a few seconds. Most of the doors worked properly when the wedges were removed. Smoke barrier doors must never be wedged open.	C 189		

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C 189	<p>Continued From page 3</p> <p>2. Based on observation, the smoke barrier door near the Director's office was dragging the floor and would not close when activated by the fire alarm system. Smoke barrier doors must close when activated by the fire alarm system.</p> <p>3. Based on observation, the handles were missing from the door to room 109. The door is equipped with a roller latch and could not be opened from the inside when closed creating an entrapment hazard. Also, the door could not be closed from the outside to protect the corridor in the event of a fire in the room.</p>	C 189		